

PLEASE TYPE OR PRINT

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ITEMS ① THROUGH ⑦ ARE FULLY COMPLETED

① SELLER GRANTOR	Name <u>DOUGLAS MANAGEMENT COMPANY</u> an Alaska corporation, authorized to do business in the State of Washington Street <u>P. O. Box 3757</u> City <u>Seattle</u> State <u>WA</u> Zip <u>98124-3757</u>	② BUYER GRANTEE	Name <u>ALASKA MARINE LINES, INC.</u> a Washington corporation Street <u>P. O. Box 3757</u> City <u>Seattle</u> State <u>WA</u> Zip <u>98124-3757</u>
③ NEW OWNER'S PERMANENT ADDRESS FOR ALL PROPERTY TAX RELATED CORRESPONDENCE	Name <u>Alaska Marine Lines, Inc.</u> Street <u>P. O. Box 3757</u> City/State <u>Seattle, WA</u> Zip <u>98124-3757</u>	ALL TAX PARCEL NUMBERS <u>087120-3035-08,</u> <u>292404-9090-07</u>	

④ LEGAL DESCRIPTION OF PROPERTY SITUATED IN UNINCORPORATED King COUNTY ☒ OR IN CITY OF _____
For legal description see attached Exhibit A and by this reference incorporated herein.

⑤ Is this property currently:

Classified or designated as forest land? Chapter 84.33 RCW	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Classified as current use land (open space, farm and agricultural, or timber)? Chapter 84.34 RCW	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Exempt from property tax under Chapter 84.36 RCW? (nonprofit organizations)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Type Property: ☐ land only ☐ land with new building.
☒ land with previously used building

SEE TAX OBLIGATIONS ON REVERSE SIDE

⑥ NOTICE OF CONTINUANCE

If the new owner(s) of land that is classified or designated as current use or forest land wish(es) to continue the classification or designation of such land, the new owner(s) must sign below. If the new owner(s) do(es) not desire to continue such classification or designation, all compensating or additional tax calculated pursuant to RCW 84.33.120 and 140 or RCW 84.34.108 shall be due and payable by the seller or transferor at the time of sale. To determine if the land transferred qualifies to continue classification or designation, the county assessor must be consulted. All new owners must sign.

Signature(s) N/A

This land ☐ does ☒ does not qualify for continuance.

Deputy Assessor _____ Date _____

⑥ Description of personal property if included in sale (furniture, appliances, etc.) None

If exemption claimed, explain Transfer to affiliated corporation as contributed capital surplus. See AGO 83-04 No. 44

Type of Document Quit Claim Deed
Date of Sale October 1, 1984

Gross Sale Price 1/	\$ <u>None</u>
Personal Property (deduct) 2/	\$ _____
Taxable Sale Price	\$ <u>None</u>
Excise Tax State 3/	\$ _____
Local 4/	\$ _____
Delinquent Penalty 5/	\$ _____
Total Tax Due	\$ <u>None</u>

(SEE 1-5 ON REVERSE SIDE)

⑦ AFFIDAVIT

I, the undersigned, being first sworn, on oath state that the foregoing information to the best of my knowledge is a true and correct statement of the facts pertaining to the transfer of the above described real estate. Any person willfully giving false information in this affidavit shall be subject to the PERJURY LAWS of the State of Washington.

SEE 6/ON REVERSE FOR PENALTIES.

Signature _____
(Specify: Grantor/Grantee/Agent for Grantor/Grantee)

Subscribed and sworn to me this 1 day of February, 1984

Notary Public

in and for the State of _____

residing at _____

⑧ The following optional questions are requested by RCW 82.45.120

Is property at the time of sale:

	YES	NO
a. Subject to elderly, disability, or physical improvement exemption?	1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>
b. Does building, if any, have a heat pump or solar heating or cooling system?	1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>
c. Does this conveyance divide a current parcel of land?	1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>
d. Does sale include current crop or merchantable timber?	1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>

e. Does conveyance involve a trade, partial interest corporate affiliates, related parties, trust, receivership or an estate?	YES 1 <input type="checkbox"/>	NO 2 <input checked="" type="checkbox"/>
f. Is the grantee acting as a nominee for a third party?	1 <input type="checkbox"/>	2 <input checked="" type="checkbox"/>
g. Principal use:		
1 <input type="checkbox"/> agricultural	2 <input type="checkbox"/> condominium	3 <input type="checkbox"/> recreational
4 <input type="checkbox"/> apt (4+ units)	5 <input checked="" type="checkbox"/> industrial	6 <input type="checkbox"/> residential
7 <input type="checkbox"/> commercial	8 <input type="checkbox"/> mobile home	9 <input type="checkbox"/> timber

FOR TREASURER'S USE ONLY